Fill in this information to identify your case:

Debtor 1   Lisa   Michelle   Balthaser
                First Name   Middle Name   Last Name

Debtor 2
(Spouse, if filing) First Name   Middle Name   Last Name

United States Bankruptcy Court for the: Eastern   District of   Pennsylvania

19-16164-MDC

Case number
(If known)

Amended March 23, 2022
Added 3 creditors 4.4-4.6

☑ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims   12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:   List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**
   ☑ No. Go to Part 2.
   ☐ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount

2.1

_____
Priority Creditor's Name

_____
Number   Street

_____

_____
City   State   ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

$_____ $_____ $_____

2.2

_____
Priority Creditor's Name

_____
Number   Street

_____

_____
City   State   ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

$_____ $_____ $_____

Debtor 1   **Lisa   Michelle   Balthaser**
       First Name   Middle Name   Last Name   Case number *(if known)* **19-16164-MDC**

Part 2:	List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☑ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1 Bank of America NA
c/o Sunrise Credit Services Inc.
Nonpriority Creditor's Name

P. O. Box 9100
Number   Street

Farmingdale   NY   11735
City   State   ZIP Code

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number **8 1 0 1**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify **credit card debt**

$ **21,347.00**

4.2 Chase Bank USA NA
c/o Client Services Inc.
Nonpriority Creditor's Name

3451 Harry S. Truman Blvd.
Number   Street

St. Charles   MO   63301
City   State   ZIP Code

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number **8 3 0 2**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify **credit card debt**

$ **2,195.00**

4.3 Calvalry SPV I, LLC
c/o Apothaker Scian PC
Nonpriority Creditor's Name

520 Fellowship Rd., Suite 306
Number   Street

Mt. Laurel   NJ   08054
City   State   ZIP Code

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?
☐ No
☐ Yes

Last 4 digits of account number **0 8 3 1**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify **credit card debt (Citibank NA)**

$ **11,010.00**

Debtor 1   **Lisa**   **Michelle**   **Balthaser**   Case number *(if known)* **19-16164-MDC**

First Name   Middle Name   Last Name

| | Case number *(if known)* | 19-16164-MDC |

Part 2:	Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.	**Total claim**

4.4

Philadelphia Gas Works

Nonpriority Creditor's Name

P.O. Box 11700

Number   Street

Newark, NJ 07101-4700

City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number __2__ __3__ __3__ __3__ $130.00

When was the debt incurred? **2/2022**

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify **Utility Bill**

4.5

PECO - Payment Processing

Nonpriority Creditor's Name

P.O. Box 37629

Number   Street

Philadelphia, PA 19101-0629

City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number __0__ __3__0__8__ __ __ __ $60.00

When was the debt incurred? **2/2022**

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify **Utility Bill**

4.6

City of Philadelphia

Nonpriority Creditor's Name

Dept. of Revenue Water

P.O. Box 41496

Number   Street

Philadelphia, PA 19101-1496

City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number __7__-__0__0__1__ __ __ __ $30.00

When was the debt incurred? **2/2022**

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of **NONPRIORITY** unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify_____

Debtor 1 **Lisa**   **Michelle**   **Balthaser**
          First Name   Middle Name   Last Name

Case number (*if known*) __**19-16164-MDC**__

| Part 3: | List Others to Be Notified About a Debt That You Already Listed |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Northstar Location Services LLC
Name

Attn: Financial Services Dept.
Number   Street

4285 Genesee Street

Cheektowaga   **NY**   **14225**
City   State   ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line __**4.1**__ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☑ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number __8__ __1__ __0__ __1__

Debtor 1   **Lisa   Michelle   Balthaser**

First Name   Middle Name   Last Name

Case number *(if known)* **19-16164-MDC**

Part 4:	Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
   Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a. **Domestic support obligations**	6a.	$ 0.00
	6b. **Taxes and certain other debts you owe the government**	6b.	$ 0.00
	6c. **Claims for death or personal injury while you were intoxicated**	6c.	$ 0.00
	6d. **Other.** Add all other priority unsecured claims. Write that amount here.	6d.	+ $ 0.00
	6e. **Total.** Add lines 6a through 6d.	6e.	$ 0.00

			Total claim
Total claims from Part 2	6f. **Student loans**	6f.	$ 0.00
	6g. **Obligations arising out of a separation agreement or divorce that you did not report as priority claims**	6g.	$ 0.00
	6h. **Debts to pension or profit-sharing plans, and other similar debts**	6h.	$ 0.00
	6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ $ 34,774.00
	6j. **Total.** Add lines 6f through 6i.	6j.	$ 34,774.00

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